

Fill in this information to identify your case:

|   |                              |                              |           |
|---|------------------------------|------------------------------|-----------|
| Debtor 1                                | <b>Katie Renee Blackburn</b> |                              |           |
|   | First Name                   | Middle Name                  | Last Name |
| Debtor 2<br>(Spouse if, filing)         | First Name                   | Middle Name                  | Last Name |
| United States Bankruptcy Court for the: |                              | EASTERN DISTRICT OF MICHIGAN |           |
| Case number<br>(if known)               | 16-41556-pjs                 |                              |           |

Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

#### Part 1: Summarize Your Assets

|     |   | <b>Your assets</b><br>Value of what you own |
|-----|---|---|
| 1.  | <b>Schedule A/B: Property</b> (Official Form 106A/B)          | \$ <b>0.00</b>                              |
| 1a. | Copy line 55, Total real estate, from Schedule A/B.....       | \$ <b>0.00</b>                              |
| 1b. | Copy line 62, Total personal property, from Schedule A/B..... | \$ <b>3,116.61</b>                          |
| 1c. | Copy line 63, Total of all property on Schedule A/B.....      | \$ <b>3,116.61</b>                          |

#### Part 2: Summarize Your Liabilities

|     |   | <b>Your liabilities</b><br>Amount you owe         |
|-----|---|---|
| 2.  | <b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 106D)   | \$ <b>17,917.00</b>                               |
| 2a. | Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> ... | \$ <b>17,917.00</b>                               |
| 3.  | <b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 106E/F)   | \$ <b>0.00</b>                                    |
| 3a. | Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....                           | \$ <b>0.00</b>                                    |
| 3b. | Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....                        | \$ <b>79,036.06</b>                               |
|     |   | <b>Your total liabilities</b> \$ <b>96,953.06</b> |

#### Part 3: Summarize Your Income and Expenses

|    |   |                    |
|----|---|--------------------|
| 4. | <b>Schedule I: Your Income</b> (Official Form 106I)                       | \$ <b>1,683.00</b> |
|    | Copy your combined monthly income from line 12 of <i>Schedule I</i> ..... | \$ <b>1,683.00</b> |
| 5. | <b>Schedule J: Your Expenses</b> (Official Form 106J)                     | \$ <b>1,682.00</b> |
|    | Copy your monthly expenses from line 22c of <i>Schedule J</i> .....       | \$ <b>1,682.00</b> |

#### Part 4: Answer These Questions for Administrative and Statistical Records

##### 6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

##### 7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ **1,415.64**

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

| From Part 4 on Schedule E/F, copy the following:   | Total claim     |
|--|-----------------|
| 9a. Domestic support obligations (Copy line 6a.)   | \$ <b>0.00</b>  |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$ <b>0.00</b>  |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$ <b>0.00</b>  |
| 9d. Student loans. (Copy line 6f.)   | \$ <b>0.00</b>  |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ <b>0.00</b>  |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$ <b>0.00</b> |
| <b>9g. Total.</b> Add lines 9a through 9f.   | \$ <b>0.00</b>  |

Fill in this information to identify your case and this filing:

Debtor 1

**Katie Renee Blackburn**

First Name

Middle Name

Last Name

Debtor 2

(Spouse, if filing)

First Name

Middle Name

Last Name

United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN

Case number 16-41556-pjs

Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- No. Go to Part 2.  
 Yes. Where is the property?

#### Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

#### 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No  
 Yes

3.1 Make: Buick  
Model: Rainer  
Year: 2006  
Approximate mileage: \_\_\_\_\_  
Other information:  
**Vehicle was totaled January 20, 2016-surrender**

Who has an interest in the property? Check one

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
  
 Check if this is community property  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?      Current value of the portion you own?

\$0.00      \$0.00

3.2 Make: Yamaha  
Model: V-Star  
Year: 2010  
Approximate mileage: \_\_\_\_\_  
Other information:  
  
**\_\_\_\_\_**

Who has an interest in the property? Check one

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
  
 Check if this is community property  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?      Current value of the portion you own?

\$0.00      \$0.00

#### 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No  
 Yes

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

**\$0.00**

**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?  
Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

No

Yes. Describe.....

**Household furnishings**

**\$350.00**

**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No

Yes. Describe.....

**Camera**

**\$100.00**

**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

Yes. Describe.....

**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Yes. Describe.....

**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.....

**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe.....

**Wardrobe**

**\$200.00**

**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe.....

**Jewelry**

**\$150.00**

**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

No

Yes. Describe.....

**(2) dogs****\$200.00****14. Any other personal and household items you did not already list, including any health aids you did not list**

- No  
 Yes. Give specific information.....

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....****\$1,000.00****Part 4: Describe Your Financial Assets****Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- No  
 Yes.....

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

- No  
 Yes.....

Institution name:

**17.1. Checking****Chase 4351 & 1627****\$66.61****18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

- No  
 Yes.....

Institution or issuer name:

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

- No  
 Yes. Give specific information about them.....

Name of entity:

% of ownership:

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.  
*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

- No  
 Yes. Give specific information about them

Issuer name:

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- No  
 Yes. List each account separately.

Type of account:

Institution name:

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- No  
 Yes. ....

Institution name or individual:

**Security deposit****Master Mind Property****\$550.00**

**23. Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

- No  
 Yes..... Issuer name and description.

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

- No  
 Yes..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

- No  
 Yes. Give specific information about them...

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

- No  
 Yes. Give specific information about them...

**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

- No  
 Yes. Give specific information about them...

**Money or property owed to you?**

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

- No  
 Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

|   |                |                   |
|---|----------------|-------------------|
| <b>Anticipated income tax refund 2015-est</b> | <b>Federal</b> | <b>\$1,500.00</b> |
|---|----------------|-------------------|

**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

- No  
 Yes. Give specific information.....

**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

- No  
 Yes. Give specific information..

**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

- No  
 Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

- No  
 Yes. Give specific information..

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

- No  
 Yes. Describe each claim.....

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

- No  
 Yes. Describe each claim.....

**35. Any financial assets you did not already list**

- No  
 Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$2,116.61

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?**

- No. Go to Part 6.  
 Yes. Go to line 38.

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
If you own or have an interest in farmland, list it in Part 1.**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

- No. Go to Part 7.  
 Yes. Go to line 47.

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above****53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

- No  
 Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here .....

\$0.00

**Part 8: List the Totals of Each Part of this Form**

|  |                              |
|--|------------------------------|
| 55. Part 1: Total real estate, line 2 .....                      | \$0.00                       |
| 56. Part 2: Total vehicles, line 5                               | \$0.00                       |
| 57. Part 3: Total personal and household items, line 15          | \$1,000.00                   |
| 58. Part 4: Total financial assets, line 36                      | \$2,116.61                   |
| 59. Part 5: Total business-related property, line 45             | \$0.00                       |
| 60. Part 6: Total farm- and fishing-related property, line 52    | \$0.00                       |
| 61. Part 7: Total other property not listed, line 54             | \$0.00                       |
| + .....  |                              |
| 62. Total personal property. Add lines 56 through 61...          | \$3,116.61                   |
|  | Copy personal property total |
|  | \$3,116.61                   |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | \$3,116.61                   |

Fill in this information to identify your case:

|   |                              |                              |           |
|---|------------------------------|------------------------------|-----------|
| Debtor 1                                | <b>Katie Renee Blackburn</b> |                              |           |
|   | First Name                   | Middle Name                  | Last Name |
| Debtor 2<br>(Spouse if, filing)         | First Name                   | Middle Name                  | Last Name |
| United States Bankruptcy Court for the: |                              | EASTERN DISTRICT OF MICHIGAN |           |
| Case number<br>(if known)               | 16-41556-pjs                 |                              |           |

Check if this is an amended filing

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

| Brief description of the property and line on <i>Schedule A/B</i> that lists this property | Current value of the portion you own    | Amount of the exemption you claim  | Specific laws that allow exemption |
|--|---|--|------------------------------------|
|  | Copy the value from <i>Schedule A/B</i> | Check only one box for each exemption.   |                                    |
| <b>Household furnishings</b><br>Line from <i>Schedule A/B: 6.1</i>                         | \$350.00                                | <input checked="" type="checkbox"/> \$350.00<br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3)              |
| <b>Camera</b><br>Line from <i>Schedule A/B: 7.1</i>  | \$100.00                                | <input checked="" type="checkbox"/> \$100.00<br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3)              |
| <b>Wardrobe</b><br>Line from <i>Schedule A/B: 11.1</i>                                     | \$200.00                                | <input checked="" type="checkbox"/> \$200.00<br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3)              |
| <b>Jewelry</b><br>Line from <i>Schedule A/B: 12.1</i>                                      | \$150.00                                | <input checked="" type="checkbox"/> \$150.00<br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(4)              |
| <b>(2) dogs</b><br>Line from <i>Schedule A/B: 13.1</i>                                     | \$200.00                                | <input checked="" type="checkbox"/> \$200.00<br><input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit | 11 U.S.C. § 522(d)(3)              |

| Brief description of the property and line on<br><i>Schedule A/B</i> that lists this property     | Current value of the<br>portion you own    | Amount of the exemption you claim  | Specific laws that allow exemption |
|---|--|--|------------------------------------|
|   | Copy the value from<br><i>Schedule A/B</i> | <i>Check only one box for each exemption.</i>  |                                    |
| <b>Checking: Chase 4351 &amp; 1627</b><br>Line from <i>Schedule A/B: 17.1</i>                     | <u>\$66.61</u>                             | <input checked="" type="checkbox"/> <u>\$66.61</u><br><input type="checkbox"/> 100% of fair market value, up to<br>any applicable statutory limit    | <b>11 U.S.C. § 522(d)(5)</b>       |
| <b>Security deposit: Master Mind<br/>Property</b><br>Line from <i>Schedule A/B: 22.1</i>          | <u>\$550.00</u>                            | <input checked="" type="checkbox"/> <u>\$550.00</u><br><input type="checkbox"/> 100% of fair market value, up to<br>any applicable statutory limit   | <b>11 U.S.C. § 522(d)(5)</b>       |
| <b>Federal: Anticipated income tax<br/>refund 2015-est</b><br>Line from <i>Schedule A/B: 28.1</i> | <u>\$1,500.00</u>                          | <input checked="" type="checkbox"/> <u>\$1,500.00</u><br><input type="checkbox"/> 100% of fair market value, up to<br>any applicable statutory limit | <b>11 U.S.C. § 522(d)(5)</b>       |

3. **Are you claiming a homestead exemption of more than \$155,675?**

(Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

- No  
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
 No  
 Yes

Fill in this information to identify your case:

|   |                              |                              |           |
|---|------------------------------|------------------------------|-----------|
| Debtor 1                                | <b>Katie Renee Blackburn</b> |                              |           |
|   | First Name                   | Middle Name                  | Last Name |
| Debtor 2<br>(Spouse if, filing)         | First Name                   | Middle Name                  | Last Name |
| United States Bankruptcy Court for the: |                              | EASTERN DISTRICT OF MICHIGAN |           |
| Case number<br>(if known)               | 16-41556-pjs                 |                              |           |

Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

#### 1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below.

#### Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

| 2.1 | Creditor's Name                       | Describe the property that secures the claim: | Column A<br>Amount of claim<br>Do not deduct the value of collateral. | Column B<br>Value of collateral that supports this claim | Column C<br>Unsecured portion if any |
|-----|---------------------------------------|---|---|--|--------------------------------------|
|     | <b>Capital One</b><br>Creditor's Name | <b>2010 Yamaha V-Star</b>                     | <b>\$5,417.00</b>   | <b>\$0.00</b>  | <b>\$5,417.00</b>                    |

**P.O. Box 30253  
Salt Lake City, UT 84130**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) **Motorcycle Loan**

Date debt was incurred **2010**

Last 4 digits of account number **5369**

#### 2.2 Credit Acceptance

Creditor's Name

**P.O. Box 551888  
Detroit, MI 48255**

Number, Street, City, State & Zip Code

Who owes the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim relates to a community debt

As of the date you file, the claim is: Check all that apply.

- Contingent  
 Unliquidated  
 Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) **Auto loan**

Date debt was incurred **2013**

Last 4 digits of account number **8379**

Debtor 1 **Katie Renee Blackburn**  
First Name Middle Name Last Name

Case number (if known) **16-41556-pjs**

Add the dollar value of your entries in Column A on this page. Write that number here:  
If this is the last page of your form, add the dollar value totals from all pages.  
Write that number here:

|                    |
|--------------------|
| <b>\$17,917.00</b> |
| <b>\$17,917.00</b> |

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.



Name, Number, Street, City, State & Zip Code  
**Yamaha**  
**P.O. Box 981402**  
**Rapid City, SD 57709**

On which line in Part 1 did you enter the creditor? 2.1

Last 4 digits of account number 5369

Fill in this information to identify your case:

|   |                              |             |           |
|---|------------------------------|-------------|-----------|
| Debtor 1  | <b>Katie Renee Blackburn</b> |             |           |
|   | First Name                   | Middle Name | Last Name |
| Debtor 2<br>(Spouse if, filing)   | First Name                   | Middle Name | Last Name |
| United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF MICHIGAN</u> |                              |             |           |
| Case number<br>(if known)   | <u>16-41556-pjs</u>          |             |           |

Check if this is an amended filing

## Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

**12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.  
 Yes.

#### Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

|     |  | Total claim   |
|-----|--|---|
| 4.1 | <b>ACOM Drug Testing Services LLC</b><br>Nonpriority Creditor's Name<br><b>1165 Belleville Rd. Ste.<br/>Ste. 107<br/>Belleville, MI 48111</b><br>Number Street City State Zip Code<br>Who incurred the debt? Check one.<br><input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes | Last 4 digits of account number <u>1565</u><br>When was the debt incurred? <u>2013</u><br><br><b>As of the date you file, the claim is:</b> Check all that apply<br><br><input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts<br><input checked="" type="checkbox"/> Other. Specify <u>medical</u> |

Debtor 1 **Katie Renee Blackburn**

Case number (if known)

**16-41556-pjs**

|            |  |  |                   |
|------------|--|--|-------------------|
| <b>4.2</b> | <p><b>Amcol Systems</b><br/>Nonpriority Creditor's Name<br/><b>111 Lancewood Rd.</b><br/><b>Columbia, SC 29210</b><br/>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only<br/> <input type="checkbox"/> Debtor 2 only<br/> <input type="checkbox"/> Debtor 1 and Debtor 2 only<br/> <input type="checkbox"/> At least one of the debtors and another<br/> <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No<br/> <input type="checkbox"/> Yes</p>                      | <p>Last 4 digits of account number <b>3227</b></p> <p>When was the debt incurred? <b>2013</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent<br/> <input type="checkbox"/> Unliquidated<br/> <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans<br/> <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br/> <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>medical</b></p> | <b>\$2,197.22</b> |
| <b>4.3</b> | <p><b>Associated Surgical Center PC</b><br/>Nonpriority Creditor's Name<br/><b>24420 Ford Rd.</b><br/><b>Dearborn Heights, MI 48127</b><br/>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only<br/> <input type="checkbox"/> Debtor 2 only<br/> <input type="checkbox"/> Debtor 1 and Debtor 2 only<br/> <input type="checkbox"/> At least one of the debtors and another<br/> <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No<br/> <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <b>2020</b></p> <p>When was the debt incurred? <b>2013</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent<br/> <input type="checkbox"/> Unliquidated<br/> <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans<br/> <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br/> <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>medical</b></p> | <b>\$237.20</b>   |
| <b>4.4</b> | <p><b>Chase Bank Services</b><br/>Nonpriority Creditor's Name<br/><b>P.O. Box 15298</b><br/><b>Wilmington, DE 19850</b><br/>Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only<br/> <input type="checkbox"/> Debtor 2 only<br/> <input type="checkbox"/> Debtor 1 and Debtor 2 only<br/> <input type="checkbox"/> At least one of the debtors and another<br/> <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No<br/> <input type="checkbox"/> Yes</p>                 | <p>Last 4 digits of account number <b>9634</b></p> <p>When was the debt incurred? <b>2012</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent<br/> <input type="checkbox"/> Unliquidated<br/> <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans<br/> <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br/> <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>misc</b></p>    | <b>\$731.00</b>   |

Debtor 1 **Katie Renee Blackburn**

Case number (if known)

**16-41556-pjs**

|            |   |   |                   |
|------------|---|---|-------------------|
| <b>4.5</b> | <p><b>Citi</b><br/>           Nonpriority Creditor's Name<br/> <b>P.O. Box 6241</b><br/> <b>Sioux Falls, SD 57117</b><br/>           Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only      <input type="checkbox"/> Debtor 2 only      <input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Yes</p>   | <p>Last 4 digits of account number <b>0041</b></p> <p>When was the debt incurred? <b>2007</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent      <input type="checkbox"/> Unliquidated      <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans      <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims      <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>misc</b></p>     | <b>\$9,428.00</b> |
| <b>4.6</b> | <p><b>Citibank</b><br/>           Nonpriority Creditor's Name<br/> <b>P.O. Box 6241</b><br/> <b>Sioux Falls, SD 57117</b><br/>           Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only      <input type="checkbox"/> Debtor 2 only      <input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Yes</p>   | <p>Last 4 digits of account number <b>5683</b></p> <p>When was the debt incurred? <b>2007</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent      <input type="checkbox"/> Unliquidated      <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans      <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims      <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>misc</b></p>     | <b>\$8,370.00</b> |
| <b>4.7</b> | <p><b>Citibank/Midland Funding LLC</b><br/>           Nonpriority Creditor's Name<br/> <b>Welzman Weinberg &amp; Reis</b><br/> <b>2155 Butterfield Dr #200</b><br/> <b>Troy, MI 48084</b><br/>           Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only      <input type="checkbox"/> Debtor 2 only      <input type="checkbox"/> Debtor 1 and Debtor 2 only      <input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No      <input type="checkbox"/> Yes</p> | <p>Last 4 digits of account number <b>4923</b></p> <p>When was the debt incurred? <b>2014</b></p> <p><b>As of the date you file, the claim is:</b> Check all that apply</p> <p><input type="checkbox"/> Contingent      <input type="checkbox"/> Unliquidated      <input type="checkbox"/> Disputed</p> <p><b>Type of NONPRIORITY unsecured claim:</b></p> <p><input type="checkbox"/> Student loans      <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims      <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Judgment</b></p> | <b>\$2,097.00</b> |

|          |   |   |            |
|----------|---|---|------------|
| 4.8      | <b>Comenity Bank</b><br>Nonpriority Creditor's Name<br><b>P.O. Box 182789</b><br><b>Columbus, OH 43218</b><br>Number Street City State Zip Code   | Last 4 digits of account number <b>2176</b>   | \$1,079.00 |
|          | Who incurred the debt? Check one.   | As of the date you file, the claim is: Check all that apply   |            |
|          | <input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes | <input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts<br><input checked="" type="checkbox"/> Other. Specify <b>misc</b>    |            |
| 4.9      | <b>Comenity Capital Bank</b><br>Nonpriority Creditor's Name<br><b>Bankruptcy Dept.</b><br><b>PO Box 105658</b><br><b>Atlanta, GA 30348</b><br>Number Street City State Zip Code   | Last 4 digits of account number <b>2086</b>   | \$679.47   |
|          | Who incurred the debt? Check one.   | As of the date you file, the claim is: Check all that apply   |            |
|          | <input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes | <input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts<br><input checked="" type="checkbox"/> Other. Specify <b>misc</b>    |            |
| 4.1<br>0 | <b>Commerical Recovery</b><br>Nonpriority Creditor's Name<br><b>13335 15 Mile Road, Ste</b><br><b>Sterling Heights, MI 48312</b><br>Number Street City State Zip Code   | Last 4 digits of account number <b>2120</b>   | \$80.58    |
|          | Who incurred the debt? Check one.   | As of the date you file, the claim is: Check all that apply   |            |
|          | <input checked="" type="checkbox"/> Debtor 1 only<br><input type="checkbox"/> Debtor 2 only<br><input type="checkbox"/> Debtor 1 and Debtor 2 only<br><input type="checkbox"/> At least one of the debtors and another<br><input type="checkbox"/> Check if this claim is for a community debt<br>Is the claim subject to offset?<br><input checked="" type="checkbox"/> No<br><input type="checkbox"/> Yes | <input type="checkbox"/> Contingent<br><input type="checkbox"/> Unliquidated<br><input type="checkbox"/> Disputed<br><b>Type of NONPRIORITY unsecured claim:</b><br><input type="checkbox"/> Student loans<br><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims<br><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts<br><input checked="" type="checkbox"/> Other. Specify <b>medical</b> |            |

4.1  
1**Coop Services**

Nonpriority Creditor's Name

**P.O. Box 51700  
Livonia, MI 48151-5700**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**4923****\$8,380.71**

When was the debt incurred?

**2014**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

**■ Other. Specify Judgment**4.1  
2**Coop Services Credit Union**

Nonpriority Creditor's Name

**29550 Five Mile Rd.  
Livonia, MI 48202**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**0571****\$384.00**

When was the debt incurred?

**2007**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

**■ Other. Specify misc**4.1  
3**Coop Services Credit Union**

Nonpriority Creditor's Name

**29550 Five Mile Rd.  
Livonia, MI 48202**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**4923****\$86.00**

When was the debt incurred?

**2012**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

**■ Other. Specify misc**

4.1  
4**Coop Services Credit Union**

Nonpriority Creditor's Name

**P.O. Box 51700  
Livonia, MI 48151**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**5343****\$7,576.98**

When was the debt incurred?

**2011**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **auto loan**

4.1  
5**Department of Education**

Nonpriority Creditor's Name

**PO Box 9635****Wilkes Barre, PA 18773-9635**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**4923****\$19,268.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **student loan**

4.1  
6**First Federal Credit**

Nonpriority Creditor's Name

**24700 Chagrin #205****Beachwood, OH 44122**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**1669****\$96.00**

When was the debt incurred?

**2013**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **medical**

4.1  
7**First Federal Credit Control**

Nonpriority Creditor's Name

**24700 Chagrin Blvd. Ste 205  
Cleveland, OH 44122**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**1669****\$96.12**

When was the debt incurred?

**2013**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **medical**

4.1  
8**Geico**

Nonpriority Creditor's Name

**One Geico Plaza  
Macon, GA 31296**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**4413****\$216.94**

When was the debt incurred?

**2014**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Insurance**

4.1  
9**Kohl's**

Nonpriority Creditor's Name

**P.O. Box 3115  
Milwaukee, WI 53201-3120**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**7545****\$540.00**

When was the debt incurred?

**2008**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **misc**

Debtor 1 **Katie Renee Blackburn**

Case number (if known)

**16-41556-pjs**4.2  
0**Law Offices of George Gusses**

Nonpriority Creditor's Name

**33 S. Huron Street  
Toledo, OH 43604**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**0001****\$55.56**

When was the debt incurred?

**2013**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **medical**

4.2  
1**Michigan Inter Pain Center**

Nonpriority Creditor's Name

**P.O. Box 673876  
Detroit, MI 48267-3876**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**5364****\$190.00**

When was the debt incurred?

**2013**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **medical**

4.2  
2**Portfolio Recovery**

Nonpriority Creditor's Name

**120 Corporate Blvd. #1  
Norfolk, VA 23502**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**1488****\$1,079.00**

When was the debt incurred?

**2014**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **credit card**

4.2  
3**Russell Collection Agency**

Nonpriority Creditor's Name

**P.O. Box 7009  
Flint, MI 48507-0009**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**4757****\$19.75**

When was the debt incurred?

**2013**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **medical**

4.2  
4**Sears**

Nonpriority Creditor's Name

**P.O. Box 6497  
Sioux Falls, SD 57117**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**4923****\$1,984.00**

When was the debt incurred?

**2013**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **misc**

4.2  
5**TD Bank USA**

Nonpriority Creditor's Name

**3701 Wayzata Blvd  
Minneapolis, MN 55440**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**0990****\$1,359.00**

When was the debt incurred?

**2008**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **misc**

4.2  
6**The Bureaus, Inc.**

Nonpriority Creditor's Name

**1717 Central Street  
Evanston, IL 60204**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**1525****\$6,089.00**

When was the debt incurred?

**2013**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **credit card**

4.2  
7**Zeal Credit Union**

Nonpriority Creditor's Name

**PO Box 51700  
Livonia, MI 48151**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**0092****\$6,243.00**

When was the debt incurred?

**2011**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **vehicle**

4.2  
8**Zeal Credit Union**

Nonpriority Creditor's Name

**PO Box 51700  
Livonia, MI 48151**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**0022****\$384.00**

When was the debt incurred?

**2007**

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **credit card**

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address

On which entry in Part 1 or Part 2 did you list the original creditor?

Debtor 1 **Katie Renee Blackburn**

Case number (if known) **16-41556-pjs**

**\*Third Party Withholding Unit  
Michigan Department of Treasury  
PO Box 30785  
Lansing, MI 48909**

Line **4.11** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**\*Third Party Withholding Unit  
Michigan Department of Treasury  
PO Box 30785  
Lansing, MI 48909**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.7** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**16th District Court  
#14-0668GC  
32765 Five Mile Rd.  
Livonia, MI 48154**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**36th District Court  
#14117001  
421 Madison Ave.  
Detroit, MI 48226**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.7** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**4923**

Name and Address  
**Botsford General Hospital  
28050 Grand River Avenue  
Farmington, MI 48336**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.20** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**4923**

Name and Address  
**CBNA  
1000 Technology Drive  
O Fallon, MO 63368**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.24** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**4923**

Name and Address  
**Co-Op Credit Union  
15140 Farmington Dr.  
Livonia, MI 48154**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.27** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**4923**

Name and Address  
**Co-Op Services CU  
Michelle L. Anzaldi, Esq  
29550 Five Mile Rd  
Livonia, MI 48154**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.11** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**Family Medical Center  
12449 Grarlon Rd.  
Carleton, MI 48117**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.17** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**1669**

Name and Address  
**Huntington National Bank  
7 Easton Oval  
Columbus, OH 43219**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.7** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Name and Address  
**JJ Marshall & Assoc.  
6060 Collection Dr.  
Utica, MI 48316**

On which entry in Part 1 or Part 2 did you list the original creditor?

Line **4.13** of (Check one):

- Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

**4923**

|   |  |
|---|--|
| Name and Address<br><b>JJ Marshall &amp; Assoc.<br/>6060 Collection Dr.<br/>Utica, MI 48316</b> | On which entry in Part 1 or Part 2 did you list the original creditor?<br>Line <u>4.5</u> of (Check one):<br><input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims<br><input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims  |
| Last 4 digits of account number   | <b>4923</b>  |
| Name and Address<br><b>Navient<br/>P.O. Box 9500<br/>Wilkes Barre, PA 18773-9500</b>            | On which entry in Part 1 or Part 2 did you list the original creditor?<br>Line <u>4.15</u> of (Check one):<br><input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims<br><input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims |
| Last 4 digits of account number   | <b>4923</b>  |
| Name and Address<br><b>Target<br/>P.O. Box 1206<br/>Oaks, PA 19456</b>                          | On which entry in Part 1 or Part 2 did you list the original creditor?<br>Line <u>4.25</u> of (Check one):<br><input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims<br><input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims |
| Last 4 digits of account number   | <b>4923</b>  |
| Name and Address<br><b>Victoria's Secret<br/>P.O. Box 659728<br/>San Antonio, TX 78265</b>      | On which entry in Part 1 or Part 2 did you list the original creditor?<br>Line <u>4.8</u> of (Check one):<br><input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims<br><input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims  |
| Last 4 digits of account number   | <b>2176</b>  |
| Name and Address<br><b>Web Bank<br/>P.O. Box 1809<br/>Hartford, CT 06144-1809</b>               | On which entry in Part 1 or Part 2 did you list the original creditor?<br>Line <u>4.9</u> of (Check one):<br><input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims<br><input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims  |
| Last 4 digits of account number   | <b>2086</b>  |

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                          |   | <b>Total Claim</b>      |
|--------------------------|---|-------------------------|
| Total claims from Part 1 | 6a. Domestic support obligations  | 6a. \$ <b>0.00</b>      |
|                          | 6b. Taxes and certain other debts you owe the government  | 6b. \$ <b>0.00</b>      |
|                          | 6c. Claims for death or personal injury while you were intoxicated  | 6c. \$ <b>0.00</b>      |
|                          | 6d. Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. \$ <b>0.00</b>      |
|                          | 6e. Total Priority. Add lines 6a through 6d.  | 6e. \$ <b>0.00</b>      |
| Total claims from Part 2 | 6f. Student loans   | 6f. \$ <b>0.00</b>      |
|                          | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. \$ <b>0.00</b>      |
|                          | 6h. Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. \$ <b>0.00</b>      |
|                          | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.                              | 6i. \$ <b>79,036.06</b> |
|                          | 6j. Total Nonpriority. Add lines 6f through 6i.   | 6j. \$ <b>79,036.06</b> |

Fill in this information to identify your case:

|   |                              |                              |           |
|---|------------------------------|------------------------------|-----------|
| Debtor 1                                | <b>Katie Renee Blackburn</b> |                              |           |
|   | First Name                   | Middle Name                  | Last Name |
| Debtor 2<br>(Spouse if, filing)         | First Name                   | Middle Name                  | Last Name |
| United States Bankruptcy Court for the: |                              | EASTERN DISTRICT OF MICHIGAN |           |
| Case number<br>(if known)               | 16-41556-pjs                 |                              |           |

Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| Person or company with whom you have the contract or lease<br>Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|--|---|
| 2.1 Master Mind Properties<br>25140 Lahser Rd #113<br>Southfield, MI 48033                                   | Rent, \$250.00                          |

Fill in this information to identify your case:

|   |                              |                              |           |
|---|------------------------------|------------------------------|-----------|
| Debtor 1                                | <b>Katie Renee Blackburn</b> |                              |           |
|   | First Name                   | Middle Name                  | Last Name |
| Debtor 2<br>(Spouse if, filing)         | First Name                   | Middle Name                  | Last Name |
| United States Bankruptcy Court for the: |                              | EASTERN DISTRICT OF MICHIGAN |           |
| Case number<br>(if known)               | 16-41556-pjs                 |                              |           |

Check if this is an amended filing

## Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- No  
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

**Column 1: Your codebtor**  
Name, Number, Street, City, State and ZIP Code

**Column 2: The creditor to whom you owe the debt**  
Check all schedules that apply:

3.1    **Daniel Blackburn**  
20091 Rosemont Ave  
Detroit, MI 48219

- Schedule D, line 2.2  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G \_\_\_\_\_  
**Credit Acceptance**

Fill in this information to identify your case:

|   |                                     |
|---|-------------------------------------|
| Debtor 1                                | <b>Katie Renee Blackburn</b>        |
| Debtor 2<br>(Spouse, if filing)         |                                     |
| United States Bankruptcy Court for the: | <b>EASTERN DISTRICT OF MICHIGAN</b> |
| Case number<br>(if known)               | <b>16-41556-pjs</b>                 |

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:  
MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

|                    | Debtor 1  | Debtor 2 or non-filing spouse  |
|--------------------|---|--|
| Employment status  | <input checked="" type="checkbox"/> Employed<br><input type="checkbox"/> Not employed | <input type="checkbox"/> Employed<br><input type="checkbox"/> Not employed |
| Occupation         | <b>Sales Expert</b>   |  |
| Employer's name    | <b>Office Depot and Subsidiaries</b>  |  |
| Employer's address | <b>6600 N. Military Trail<br/>Boca Raton, FL 33496</b>                                |  |

How long employed there? **1 month**

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

|  | For Debtor 1          | For Debtor 2 or non-filing spouse |
|--|-----------------------|-----------------------------------|
| 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2. \$ <b>1,764.00</b> | \$ <b>N/A</b>                     |
| 3. Estimate and list monthly overtime pay.   | 3. +\$ <b>0.00</b>    | +\$ <b>N/A</b>                    |
| 4. Calculate gross income. Add line 2 + line 3.  | 4. \$ <b>1,764.00</b> | \$ <b>N/A</b>                     |

| Copy line 4 here .....   | For Debtor 1                   | For Debtor 2 or non-filing spouse  |
|--|--------------------------------|------------------------------------|
| <b>5.</b> List all payroll deductions:   | 4. \$ <u>1,764.00</u>          | \$ <u>N/A</u>                      |
| 5a. Tax, Medicare, and Social Security deductions  | 5a. \$ <u>247.00</u>           | \$ <u>N/A</u>                      |
| 5b. Mandatory contributions for retirement plans   | 5b. \$ <u>0.00</u>             | \$ <u>N/A</u>                      |
| 5c. Voluntary contributions for retirement plans   | 5c. \$ <u>0.00</u>             | \$ <u>N/A</u>                      |
| 5d. Required repayments of retirement fund loans   | 5d. \$ <u>0.00</u>             | \$ <u>N/A</u>                      |
| 5e. Insurance  | 5e. \$ <u>0.00</u>             | \$ <u>N/A</u>                      |
| 5f. Domestic support obligations   | 5f. \$ <u>0.00</u>             | \$ <u>N/A</u>                      |
| 5g. Union dues   | 5g. \$ <u>0.00</u>             | \$ <u>N/A</u>                      |
| 5h. Other deductions. Specify: _____   | 5h.+ \$ <u>0.00</u> + \$       | \$ <u>N/A</u>                      |
| <b>6.</b> Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.   | 6. \$ <u>247.00</u>            | \$ <u>N/A</u>                      |
| <b>7.</b> Calculate total monthly take-home pay. Subtract line 6 from line 4.  | 7. \$ <u>1,517.00</u>          | \$ <u>N/A</u>                      |
| <b>8.</b> List all other income regularly received:  |                                |                                    |
| 8a. Net income from rental property and from operating a business, profession, or farm<br>Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  | 8a. \$ <u>0.00</u>             | \$ <u>N/A</u>                      |
| 8b. Interest and dividends   | 8b. \$ <u>0.00</u>             | \$ <u>N/A</u>                      |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive<br>Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c. \$ <u>0.00</u>             | \$ <u>N/A</u>                      |
| 8d. Unemployment compensation  | 8d. \$ <u>0.00</u>             | \$ <u>N/A</u>                      |
| 8e. Social Security  | 8e. \$ <u>0.00</u>             | \$ <u>N/A</u>                      |
| 8f. Other government assistance that you regularly receive<br>Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.<br>Specify: _____   | 8f. \$ <u>0.00</u>             | \$ <u>N/A</u>                      |
| 8g. Pension or retirement income   | 8g. \$ <u>0.00</u>             | \$ <u>N/A</u>                      |
| 8h. Other monthly income. Specify: <u>DHS</u>  | 8h.+ \$ <u>166.00</u> + \$     | \$ <u>N/A</u>                      |
| <b>9.</b> Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9. \$ <u>166.00</u>            | \$ <u>N/A</u>                      |
| <b>10.</b> Calculate monthly income. Add line 7 + line 9.<br>Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10. \$ <u>1,683.00</u> + \$    | \$ <u>N/A</u> = \$ <u>1,683.00</u> |
| <b>11.</b> State all other regular contributions to the expenses that you list in Schedule J.<br>Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.<br>Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.<br>Specify: _____ | 11. +\$                        | \$ <u>0.00</u>                     |
| <b>12.</b> Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.<br>Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies   | 12. \$ <u>1,683.00</u>         |                                    |
| <b>13.</b> Do you expect an increase or decrease within the year after you file this form?<br><input checked="" type="checkbox"/> No.<br><input type="checkbox"/> Yes. Explain: _____  | <b>Combined monthly income</b> |                                    |

Fill in this information to identify your case:

|   |                                     |
|---|-------------------------------------|
| Debtor 1                                | <b>Katie Renee Blackburn</b>        |
| Debtor 2<br>(Spouse, if filing)         |                                     |
| United States Bankruptcy Court for the: | <b>EASTERN DISTRICT OF MICHIGAN</b> |
| Case number<br>(If known)               | <b>16-41556-pjs</b>                 |

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

##### 1. Is this a joint case?

No. Go to line 2.

Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

##### 2. Do you have dependents? No

Do not list Debtor 1 and  
Debtor 2.

Yes. Fill out this information for  
each dependent.....

Do not state the  
dependents names.

Dependent's relationship to  
Debtor 1 or Debtor 2

Dependent's  
age

Does dependent  
live with you?

Son

1 1/2 mo

- No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes

##### 3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know  
the value of such assistance and have included it on Schedule I: Your Income  
(Official Form 106I.)

##### 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ **250.00**

#### Your expenses

##### If not included in line 4:

- 4a. Real estate taxes  
4b. Property, homeowner's, or renter's insurance  
4c. Home maintenance, repair, and upkeep expenses  
4d. Homeowner's association or condominium dues

- 4a. \$ **0.00**  
4b. \$ **0.00**  
4c. \$ **0.00**  
4d. \$ **0.00**  
5. \$ **0.00**

|  |  |                      |
|--|--|----------------------|
| <b>6. Utilities:</b>   | 6a. Electricity, heat, natural gas       | 6a. \$ <b>190.00</b> |
| 6b. Water, sewer, garbage collection   | 6b. \$ <b>40.00</b>                      |                      |
| 6c. Telephone, cell phone, Internet, satellite, and cable services   | 6c. \$ <b>80.00</b>                      |                      |
| 6d. Other. Specify: _____  | 6d. \$ <b>0.00</b>                       |                      |
| <b>7. Food and housekeeping supplies</b>   | 7. \$ <b>400.00</b>                      |                      |
| <b>8. Childcare and children's education costs</b>   | 8. \$ <b>0.00</b>                        |                      |
| <b>9. Clothing, laundry, and dry cleaning</b>  | 9. \$ <b>122.00</b>                      |                      |
| <b>10. Personal care products and services</b>   | 10. \$ <b>70.00</b>                      |                      |
| <b>11. Medical and dental expenses</b>   | 11. \$ <b>50.00</b>                      |                      |
| <b>12. Transportation.</b> Include gas, maintenance, bus or train fare.<br>Do not include car payments.  | 12. \$ <b>250.00</b>                     |                      |
| <b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>  | 13. \$ <b>100.00</b>                     |                      |
| <b>14. Charitable contributions and religious donations</b>  | 14. \$ <b>0.00</b>                       |                      |
| <b>15. Insurance.</b><br>Do not include insurance deducted from your pay or included in lines 4 or 20.   |  |                      |
| 15a. Life insurance  | 15a. \$ <b>0.00</b>                      |                      |
| 15b. Health insurance  | 15b. \$ <b>0.00</b>                      |                      |
| 15c. Vehicle insurance   | 15c. \$ <b>0.00</b>                      |                      |
| 15d. Other insurance. Specify: _____   | 15d. \$ <b>0.00</b>                      |                      |
| <b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.<br>Specify: _____  | 16. \$ <b>0.00</b>                       |                      |
| <b>17. Installment or lease payments:</b>  | 17a. \$ <b>0.00</b>                      |                      |
| 17b. Car payments for Vehicle 2  | 17b. \$ <b>0.00</b>                      |                      |
| 17c. Other. Specify: _____   | 17c. \$ <b>0.00</b>                      |                      |
| 17d. Other. Specify: _____   | 17d. \$ <b>0.00</b>                      |                      |
| <b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>   | 18. \$ <b>0.00</b>                       |                      |
| <b>19. Other payments you make to support others who do not live with you.</b><br>Specify: _____   | \$ <b>0.00</b>                           |                      |
| <b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>   |  |                      |
| 20a. Mortgages on other property   | 20a. \$ <b>0.00</b>                      |                      |
| 20b. Real estate taxes   | 20b. \$ <b>0.00</b>                      |                      |
| 20c. Property, homeowner's, or renter's insurance  | 20c. \$ <b>0.00</b>                      |                      |
| 20d. Maintenance, repair, and upkeep expenses  | 20d. \$ <b>0.00</b>                      |                      |
| 20e. Homeowner's association or condominium dues   | 20e. \$ <b>0.00</b>                      |                      |
| <b>21. Other:</b> Specify: <b>Pet</b><br><b>Diapers/wipes</b>  | 21. +\$ <b>50.00</b><br>+\$ <b>80.00</b> |                      |
| <b>22. Calculate your monthly expenses</b>   | \$ <b>1,682.00</b>                       |                      |
| 22a. Add lines 4 through 21.   | \$ <b>1,682.00</b>                       |                      |
| 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   | \$ <b>1,682.00</b>                       |                      |
| 22c. Add line 22a and 22b. The result is your monthly expenses.  | \$ <b>1,682.00</b>                       |                      |
| <b>23. Calculate your monthly net income.</b>  |  |                      |
| 23a. Copy line 12 (your combined monthly income) from Schedule I.  | 23a. \$ <b>1,683.00</b>                  |                      |
| 23b. Copy your monthly expenses from line 22c above.   | 23b. -\$ <b>1,682.00</b>                 |                      |
| 23c. Subtract your monthly expenses from your monthly income.<br>The result is your <i>monthly net income</i> .  | 23c. \$ <b>1.00</b>                      |                      |
| <b>24. Do you expect an increase or decrease in your expenses within the year after you file this form?</b><br>For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? |  |                      |
| <input checked="" type="checkbox"/> No.  |  |                      |
| <input type="checkbox"/> Yes.  | Explain here: _____                      |                      |

**Fill in this information to identify your case:**

|   |                              |             |           |
|---|------------------------------|-------------|-----------|
| Debtor 1                                | <b>Katie Renee Blackburn</b> |             |           |
|   | First Name                   | Middle Name | Last Name |
| Debtor 2<br>(Spouse if, filing)         | First Name                   | Middle Name | Last Name |
| United States Bankruptcy Court for the: | EASTERN DISTRICT OF MICHIGAN |             |           |
| Case number<br>(if known)               | 16-41556-pjs                 |             |           |

Check if this is an amended filing

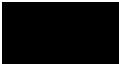
Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

 Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Katie Renee Blackburn

Katie Renee Blackburn

Signature of Debtor 1

Date February 8, 2016

X

\_\_\_\_\_  
Signature of Debtor 2

Date \_\_\_\_\_

Fill in this information to identify your case:

|   |                              |             |           |
|---|------------------------------|-------------|-----------|
| Debtor 1                                | <b>Katie Renee Blackburn</b> |             |           |
|   | First Name                   | Middle Name | Last Name |
| Debtor 2<br>(Spouse if, filing)         | First Name                   | Middle Name | Last Name |
| United States Bankruptcy Court for the: | EASTERN DISTRICT OF MICHIGAN |             |           |
| Case number<br>(if known)               | <u>16-41556-pjs</u>          |             |           |

Check if this is an amended filing

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Give Details About Your Marital Status and Where You Lived Before

##### 1. What is your current marital status?

- Married  
 Not married

##### 2. During the last 3 years, have you lived anywhere other than where you live now?

- No  
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1 Prior Address:

Dates Debtor 1  
lived there

Debtor 2 Prior Address:

Dates Debtor 2  
lived there

##### 3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)

- No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

#### Part 2 Explain the Sources of Your Income

##### 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  
If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- No  
 Yes. Fill in the details.

| Debtor 1                                   | Gross income<br>(before deductions and exclusions) | Debtor 2                                   | Gross income<br>(before deductions and exclusions) |
|--|--|--|--|
| Sources of income<br>Check all that apply. |  | Sources of income<br>Check all that apply. |  |

From January 1 of current year until  
the date you filed for bankruptcy:

- Wages, commissions,  
bonuses, tips  
 Operating a business

\$1,017.18

- Wages, commissions,  
bonuses, tips  
 Operating a business

|   | <b>Debtor 1</b><br><b>Sources of income</b><br>Check all that apply.  | <b>Gross income</b><br>(before deductions and exclusions) | <b>Debtor 2</b><br><b>Sources of income</b><br>Check all that apply.   | <b>Gross income</b><br>(before deductions and exclusions) |
|---|---|---|--|---|
| <b>For last calendar year:</b><br><b>(January 1 to December 31, 2015 )</b>            | <input checked="" type="checkbox"/> Wages, commissions,<br>bonuses, tips<br><br><input type="checkbox"/> Operating a business | <b>\$16,756.00</b>  | <input type="checkbox"/> Wages, commissions,<br>bonuses, tips<br><br><input type="checkbox"/> Operating a business |   |
| <b>For the calendar year before that:</b><br><b>(January 1 to December 31, 2014 )</b> | <input checked="" type="checkbox"/> Wages, commissions,<br>bonuses, tips<br><br><input type="checkbox"/> Operating a business | <b>\$16,756.00</b>  | <input type="checkbox"/> Wages, commissions,<br>bonuses, tips<br><br><input type="checkbox"/> Operating a business |   |

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- No  
 Yes. Fill in the details.

|   | <b>Debtor 1</b><br><b>Sources of income</b><br>Describe below.. | <b>Gross income</b><br>(before deductions and exclusions) | <b>Debtor 2</b><br><b>Sources of income</b><br>Describe below. | <b>Gross income</b><br>(before deductions and exclusions) |
|---|---|---|--|---|
| <b>From January 1 of current year until the date you filed for bankruptcy:</b>        | <b>DHS</b>  | <b>\$1,920.00</b>   |  |   |
| <b>For last calendar year:</b><br><b>(January 1 to December 31, 2015 )</b>            | <b>DHS</b>  | <b>\$1,920.00</b>   |  |   |
| <b>For the calendar year before that:</b><br><b>(January 1 to December 31, 2014 )</b> | <b>DHS</b>  | <b>\$1,920.00</b>   |  |   |

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

- No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225\* or more?

- No. Go to line 7.  
 Yes. List below each creditor to whom you paid a total of \$6,225\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.

- Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

- No. Go to line 7.  
 Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

| Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for ... |
|-----------------------------|------------------|-------------------|----------------------|--------------------------|
|                             |                  |                   |                      |                          |

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

 No Yes. List all payments to an insider

| Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
|----------------------------|------------------|-------------------|----------------------|-------------------------|
|----------------------------|------------------|-------------------|----------------------|-------------------------|

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

 No Yes. List all payments to an insider

| Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment<br>Include creditor's name |
|----------------------------|------------------|-------------------|----------------------|--|
|----------------------------|------------------|-------------------|----------------------|--|

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures****9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

 No Yes. Fill in the details.

| Case title<br>Case number                          | Nature of the case | Court or agency   | Status of the case   |
|--|--------------------|---|--|
| Co-Op Services CU v Katie Blackburn<br>14-06968-GC | Civil Suit         | 16th District Court<br>#14-06968-GC<br>32765 Five Mile Rd.<br>Livonia, MI 48154 | <input type="checkbox"/> Pending<br><input type="checkbox"/> On appeal<br><input type="checkbox"/> Concluded |
| Midland Funding v Katie Blackburn<br>14-117001     | Civil Suit         | 36th District Court<br>#14-117001<br>421 Madison Ave.<br>Detroit, MI 48226      | <input type="checkbox"/> Pending<br><input type="checkbox"/> On appeal<br><input type="checkbox"/> Concluded |

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**  
Check all that apply and fill in the details below. No Yes. Fill in the information below.

| Creditor Name and Address | Describe the Property | Date | Value of the property |
|---------------------------|-----------------------|------|-----------------------|
|                           | Explain what happened |      |                       |

**11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?** No Yes. Fill in the details.

| Creditor Name and Address | Describe the action the creditor took | Date action was taken | Amount |
|---------------------------|---------------------------------------|-----------------------|--------|
|                           |                                       |                       |        |

**12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?** No Yes

**Part 5: List Certain Gifts and Contributions**

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No  
 Yes. Fill in the details for each gift.

| Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
|--|--------------------|--------------------------|-------|
| Person to Whom You Gave the Gift and Address:          |                    |                          |       |

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No  
 Yes. Fill in the details for each gift or contribution.

| Gifts or contributions to charities that total more than \$600 | Charity's Name | Address (Number, Street, City, State and ZIP Code) | Describe what you contributed | Dates you contributed | Value |
|--|----------------|--|-------------------------------|-----------------------|-------|
|  |                |  |                               |                       |       |

**Part 6: List Certain Losses**

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No  
 Yes. Fill in the details.

| Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss  | Date of your loss | Value of property lost |
|--|---|-------------------|------------------------|
|  | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. |                   |                        |

**Part 7: List Certain Payments or Transfers**

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No  
 Yes. Fill in the details.

| Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|---|---|-----------------------------------|-------------------|
| Frego & Associates - The Bankruptcy Law<br>23843 Joy Road<br>Dearborn Heights, MI 48127               |   | 9/28/2015                         | \$100.00          |

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

No  
 Yes. Fill in the details.

| Person Who Was Paid<br>Address | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
|--------------------------------|---|-----------------------------------|-------------------|
|                                |   |                                   |                   |

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- No  
 Yes. Fill in the details.

| Person Who Received Transfer<br>Address | Description and value of<br>property transferred | Describe any property or<br>payments received or debts<br>paid in exchange | Date transfer was<br>made |
|---|--|--|---------------------------|
| Person's relationship to you<br>unknown | 2000 Taurus \$450.00                             | \$450.00   | 6/2015                    |

None

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- No  
 Yes. Fill in the details.

| Name of trust | Description and value of the property transferred | Date Transfer was<br>made |
|---------------|---|---------------------------|
|---------------|---|---------------------------|

#### Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- No  
 Yes. Fill in the details.

| Name of Financial Institution and<br>Address (Number, Street, City, State and ZIP Code) | Last 4 digits of<br>account number | Type of account or<br>instrument | Date account was<br>closed, sold,<br>moved, or<br>transferred | Last balance<br>before closing or<br>transfer |
|---|------------------------------------|----------------------------------|---|---|
|---|------------------------------------|----------------------------------|---|---|

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- No  
 Yes. Fill in the details.

| Name of Financial Institution<br>Address (Number, Street, City, State and ZIP Code) | Who else had access to it?<br>Address (Number, Street, City,<br>State and ZIP Code) | Describe the contents | Do you still<br>have it? |
|---|---|-----------------------|--------------------------|
|---|---|-----------------------|--------------------------|

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy

- No  
 Yes. Fill in the details.

| Name of Storage Facility<br>Address (Number, Street, City, State and ZIP Code) | Who else has or had access<br>to it?<br>Address (Number, Street, City,<br>State and ZIP Code) | Describe the contents | Do you still<br>have it? |
|--|---|-----------------------|--------------------------|
|--|---|-----------------------|--------------------------|

#### Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- No  
 Yes. Fill in the details.

| Owner's Name<br>Address (Number, Street, City, State and ZIP Code) | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code) | Describe the property | Value |
|--|---|-----------------------|-------|
|--|---|-----------------------|-------|

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- No
- Yes. Fill in the details.

| Name of site<br>Address (Number, Street, City, State and ZIP Code) | Governmental unit<br>Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
|--|---|-----------------------------------|----------------|
|--|---|-----------------------------------|----------------|

25. Have you notified any governmental unit of any release of hazardous material?

- No
- Yes. Fill in the details.

| Name of site<br>Address (Number, Street, City, State and ZIP Code) | Governmental unit<br>Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |
|--|---|-----------------------------------|----------------|
|--|---|-----------------------------------|----------------|

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- No
- Yes. Fill in the details.

| Case Title<br>Case Number | Court or agency<br>Name<br>Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case |
|---------------------------|---|--------------------|--------------------|
|---------------------------|---|--------------------|--------------------|

**Part 11: Give Details About Your Business or Connections to Any Business**

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership ( LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation
- No. None of the above applies. Go to Part 12.
- Yes. Check all that apply above and fill in the details below for each business.

|  |   |  |
|--|---|--|
| Business Name<br>Address<br>(Number, Street, City, State and ZIP Code) | Describe the nature of the business<br>Name of accountant or bookkeeper | Employer Identification number<br>Do not include Social Security number or ITIN.<br>Dates business existed |
|--|---|--|

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- No  
 Yes. Fill in the details below.

Name  
Address  
(Number, Street, City, State and ZIP Code)

Date Issued

**Part 12: Sign Below**

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Katie Renee Blackburn

Katie Renee Blackburn  
Signature of Debtor 1

Signature of Debtor 2

Date February 8, 2016

Date \_\_\_\_\_

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- No  
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

- No  
 Yes. Name of Person \_\_\_\_\_. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).